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ABSTRACT

This guide lists resources and other materials for implementing drug and alcohol prevention programs in rural communities. Materials and resources focus on community, school, and parent education programs. The first section lists 24 prevention materials, including videos, booklets, curricula, books, posters, and newsletters. Each listing includes the name of the organization that developed the material, the year it was developed, a brief description, target audience, setting, and availability information. The second section includes 33 studies, articles, and reports on rural communities, including government publications. Each listing includes title, author, availability information, and an abstract. The last section lists the names and addresses of 37 organizations and programs related to rural communities in general or to drug and alcohol prevention in rural areas. (LP)

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ED 389 494

Center for Substance Abuse Prevention

Alcohol, Tobacco, and Other Drugs Resource Guide

Drug-Free by the Year 2000

RURAL COMMUNITIES

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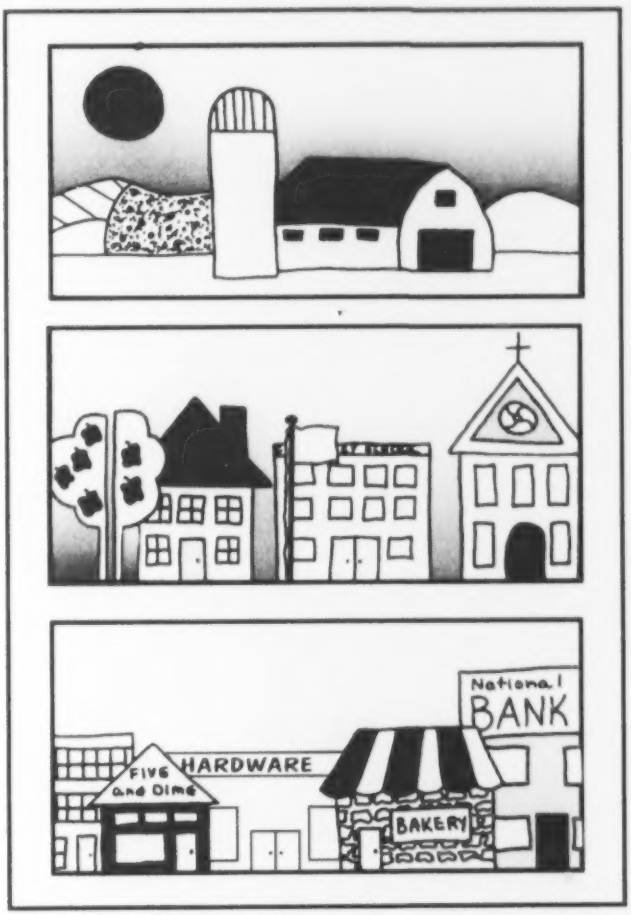

August 1994

Prevention Materials 1

Studies, Articles, & Reports 9

Groups, Organizations, & Programs 25

From the Director of CSAP...

Roughly 27 percent of the U.S. population lives in rural regions of the country. These citizens face challenges that city-dwellers and suburbanites do not. Geographic isolation, lack of available resources and activities, and a relative absence of anonymity lead many rural residents to turn to alcohol and other drugs.

This guide includes a host of resources that we believe will help prevention specialists, teachers, health care providers, and others like you in our mutual quest for drug-free neighborhoods. This guide offers hope for our rural communities, and we at CSAP look forward to working side by side with you as we pursue this exciting goal.

Elaine M. Johnson, Ph.D.

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
Public Health Service
Substance Abuse and Mental Health Services Administration

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The listing of materials or programs in this resource guide does not constitute or imply endorsement by the Center for Substance Abuse Prevention, the Public Health Service, or the Department of Health and Human Services. The materials have been reviewed for accuracy, appropriateness, and conformance with public health principles.

This Alcohol, Tobacco, and Other Drugs Resource Guide was compiled from a variety of publications and data bases and represents the most current information to date. It is not an all-inclusive listing of materials on this topic. This guide will be updated regularly, and your comments or suggestions are welcome. To suggest information or materials that might be included in updated editions, please write to the **National Clearinghouse for Alcohol and Drug Information (NCADI), P.O. Box 2345, Rockville, MD 20847-2345.**

Produced by the National Clearinghouse for Alcohol and Drug Information, Karen Zuckerman, editor.

For further information on alcohol, tobacco, and other drugs, call 1-800-729-6686, 301-468-2600, or TDD 1-800-487-4889.

Please feel free to be a "copy cat," and make all the copies you want. You have our permission!

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Prevention Materials for Rural Communities

Communities: Architects for Drug-Free Tomorrows

Organization: Northeast Regional Center

Year: 1989

Format: VHS Video

Length: 22 Minutes

Context: Part of a Packet/Program

Topic: Alcohol and Other Drugs and Prevention

Target Audience: Alcohol and Other Drug Prevention Professionals, Community Service Groups, and Policymakers/ Administrators

Setting: Community Organizations and Rural Communities

Availability: Northeast Regional Center, 12 Overton Avenue, Sayville, NY 11782, 516-589-7022

This video describes several after school and weekend programs that four communities have planned and implemented in hopes of eliminating the alcohol and other drug use problems within their neighborhoods. Berlin, Connecticut, is featured as a rural town that created a teen-run outreach program. Teachers, parents, youth, police, and the local government are all participants in the drug prevention efforts highlighted.

Turning Awareness into Action: What Your Community Can Do About Drug Use in America

Organization: Center for Substance Abuse Prevention

Year: 1991

Format: Book

Length: 68 Pages

Topic: Prevention

Target Audience: Community Service Groups, Educators, and Parents

Setting: Community Organizations

Language: English and Spanish

Readability: Average

Inventory no.: PHD519

Availability: National Clearinghouse for Alcohol and Drug Information, P.O. Box 2345, Rockville, MD 20847, 1-800-729-6686

This booklet gives examples of several community drug prevention programs and offers suggestions on what steps citizens can take to help keep their neighborhoods drug-free. A listing of government and non-government sources is included for further information.

What You Can Do About Drug Use in America

Organization: Center for Substance Abuse Prevention

Year: 1990

Format: Book

Length: 29 Pages

Topic: Alcohol and Other Drugs

Target Audience: General Public

Setting: Community Organizations

Language: English and Spanish

Readability: Average

Inventory no.: PHD587

Availability: National Clearinghouse for Alcohol and Drug Information, P.O. Box 2345, Rockville, MD 20847, 1-800-729-6686

This bilingual pamphlet, printed in English and Spanish, provides an overview of alcohol and other drug (AOD) use and what can be done to stop it. The effects of AOD on the body, ways to cope with an AOD problem at home, and a listing of resources for additional help and information are included.

Rural Alcohol and Drug Intervention Instruction (RADII) Project

Organization: RADII Project

Year: 1993

Format: Curriculum

Length: 7 Modules

Context: Part of a Packet/Program

Topic: Alcohol and Other Drugs and Prevention

Target Audience: Educators--K-12, Community Service Groups, and Alcohol and Other Drug Prevention Professionals

Setting: Rural and Community Organizations

Readability: Average

Availability: RADII Project, Department of Community Health and Nutrition, University of Northern Colorado, Greeley, CO 80639

The RADII Project focuses on the unique issues facing rural communities across the Nation and looks at several effective strategies in preventing and intervening with alcohol and other drug problems. Seven training modules are available, each full of information and activities needed to train impactors in the community who want to increase positive behavior development: 1) assessing and involving the community, 2) choosing intervention strategies, 3) developing policy, 4) identifying teaching strategies, 5) including students in prevention, 6) selecting and implementing a curriculum, and 7) strengthening families.

Prevention Plus II: Tools for Creating and Sustaining Drug Free Communities

Organization: Center for Substance Abuse Prevention

Year: 1989

Format: Book

Length: 541 Pages

Topic: Alcohol and Other Drugs and Prevention

Target Audience: Community Service Groups, General Public, and Parents

Setting: Community Organizations

Readability: Average

Inventory no.: BK159

Availability: National Clearinghouse for Alcohol and Drug Information, P.O. Box 2345, Rockville, MD 20847, 1-800-729-6686

This manual is designed to help prevention planners and other interested community members develop effective alcohol and other drug prevention programs for youth in their neighborhoods. The book explains how individual, interpersonal, and environmental situations all contribute to alcohol and other drug use, and provides strategies for combating each of these factors. Worksheets, charts, and other aids are included to assist in the organization and implementation of such programs.

Prevention Plus III

Organization: Center for Substance Abuse Prevention

Year: 1991

Format: Book

Length: 461 Pages

Topic: Alcohol and Other Drugs and Prevention

Target Audience: Alcohol and Other Drug Prevention Professionals and Community Service Groups

Setting: Workplace and Community Organizations

Readability: Average

Inventory no.: BK188

Availability: National Clearinghouse for Alcohol and Drug Information, P.O. Box 2345, Rockville, MD 20847, 1-800-729-6686

This comprehensive manual is designed to assess alcohol and other drug prevention programs at the school and community level. Divided into four steps, the guide includes identifying goals, identifying desired outcomes, process assessment, and impact assessment. It contains worksheets and other useful tools for program assessment, evaluation, and planning.

The Future by Design

Organization: Center for Substance Abuse Prevention

Year: 1991

Format: Book

Length: 220 Pages

Topic: Alcohol and Other Drugs and Prevention

Target Audience: Alcohol and Other Drug Prevention Professionals and Community Service Groups

Setting: Community Organizations

Readability: Average

Inventory no.: BK189

Availability: National Clearinghouse for Alcohol and Drug Information, P.O. Box 2345, Rockville, MD 20847, 1-800-729-6686

This book provides extensive information and assistance on how to build community partnerships that focus on alcohol and other drug prevention. Topics include initiating a community-wide prevention effort, leadership, maintaining the momentum, activities, building resources, assessment, and partnerships through cooperation, coordination, and collaboration. Recommendations are offered regarding special populations including ethnic/racial groups, women, and parents.

Getting It Together: Promoting Drug-Free Communities

Organization: Center for Substance Abuse Prevention

Year: 1991

Format: Book

Length: 71 Pages

Topic: Alcohol and Other Drugs and Prevention

Target Audience: Community Service Groups and Educators

Setting: Community Organizations and Schools

Readability: Average

Inventory no.: PHD579

Availability: National Clearinghouse for Alcohol and Drug Information, P.O. Box 2345, Rockville, MD 20847, 1-800-729-6686

This guide is designed to assist organizations and individuals who work with youth in the alcohol and other drug prevention field. The book suggests that coalitions, not individual groups, are needed to plan and implement effective prevention programs. Program planning, evaluation, and raising money are some of the subjects addressed.

Rural Perspectives

Organization: National Rural Alcohol and Drug Abuse Network, Inc.

Year: Quarterly

Format: Newsletter

Length: 4-6 Pages

Topic: Alcohol and Other Drugs and Prevention

Target Audience: Rural Communities

Setting: Community Organizations and Homes

Readability: Average

Availability: National Rural Institute on Alcohol and Drug Abuse, UW-Eau Claire, Eau Claire, WI 54702-4004, 715-836-2031

This newsletter is a potpourri of information for rural ATOD prevention professionals. It reports new findings, facts and figures, health initiatives, prevalence, and resources. It also announces upcoming conferences.

Our Biggest Drug and Alcohol Problem Is Pretending We Don't Have One

Organization: Fox Valley Unites

Year: 1992

Format: Posters

Topic: Alcohol and Prevention

Target Audience: Parents

Setting: Community Organizations, Rural Communities, and Schools

Readability: Easy

Availability: Fox Valley Unites, 222 West College Avenue, Appleton, WI 54911; 414-730-4750

This series of four posters depicts the problems that children of alcoholics and young alcoholics themselves face. Each poster displays a bold title with a black and white photograph underneath it. The four posters are entitled: "When my mom isn't drunk she can be pretty cool. No. Really. She Can"; "Honesty. Integrity. Sensitivity. Drunkenness. Stuff you can learn from your dad"; "Alright, so my kids see me drunk now and then. So what? Does that make me a bad father?"; and "I am fifteen years old. I live in the Fox Valley. I am an alcoholic. So's my little brother." Each poster contains the series' motto: "Our biggest drug and alcohol problem is pretending we don't have one."

Parents Guide to Teenage Parties: Second Edition

Organization: Wisconsin Clearinghouse

Year: 1989

Format: Booklet

Length: 15 Pages

Topic: Alcohol and Other Drugs and Prevention

Target Audience: Parents

Setting: Home

Readability: Fairly Difficult

Availability: Wisconsin Clearinghouse, University of Wisconsin, P.O. Box 1468, Madison, WI 53701, 1-800-322-1468

This pamphlet provides guidelines for parents to follow regarding their teenage children and parties they either host or attend. It encourages open parent-child communication and suggests that parents set rules regarding curfews, drinking, and appropriate behavior. Recipes for non-alcoholic party drinks are included, and a listing of other relevant publications are referenced.

The Typical Alcoholic American

Organization: Center for Substance Abuse Prevention

Year: 1992

Format: Poster

Topic: Alcoholism

Target Audience: All Age Groups, Occupations, and Areas of Residence

Availability: National Clearinghouse for Alcohol and Drug Information, P.O. Box 2345, Rockville, MD 20847, 1-800-729-6686

This poster deflates the stereotype of the alcoholic by conveying the message that alcoholism is common to all racial and ethnic populations and occupations. Meaningful to a diverse audience; includes a farmer.

We Steer Clear of Alcohol and Other Drugs

Organization: Wisconsin Clearinghouse

Year: 1989

Format: Poster

Topic: Alcohol and Other Drugs and Prevention

Target Audience: General Public, Elementary and Jr. High Youth

Setting: Community Organizations and Schools

Readability: Low Literacy

Availability: Wisconsin Clearinghouse, University of Wisconsin, P.O. Box 1468, Madison, WI 53701, 1-800-322-1468

This colorful poster shows children bicycling, skateboarding, and roller-skating through a mountainous hillside. The caption reads, "We steer clear of alcohol and other drugs! That's the only healthy choice for kids."

Friends Keep Friends Alive!

Organization: Mothers Against Drunk Drivers (MADD)

Year: 1989

Format: Comic Book

Length: 16 Pages

Topic: Alcohol and Prevention

Target Audience: Educators, Elementary and Jr. High Youth

Setting: Community Organizations and Schools

Language: English and Spanish

Readability: Low Literacy

Availability: Wisconsin Clearinghouse, University of Wisconsin, Box 1468, Madison, WI 53701-1468, 1-800-322-1468

This comic book, through the stories of several youth, graphically points out the dangers of using alcohol and other drugs while driving. The effect that alcohol has on the body is discussed, as well as its impact on driving ability. A listing of similar publications is also included.

Drugs Mean Nicotine Too!

Organization: Hazelden

Year: 1989

Format: Brochure

Length: 8 Pages

Topic: Tobacco, Alcohol, and Other Drugs and Prevention

Target Audience: Community Service Groups, Elementary and Jr. High Youth

Setting: Community Organizations and Schools

Readability: Easy

Availability: Hazelden, Pleasant Valley Road, P.O. Box 176, Center City, MN 55012-0176,1-800-328-9000

This pamphlet defines tobacco as "the hidden drug," and states that it is one of the most addictive drugs there is. Effects of nicotine on the body, reasons why people begin to smoke, and difficulties of quitting are some of the topics addressed. Teenagers are urged to talk to a parent, friend, or teacher about their problems, and not to "plug up your mouth with a cigarette and medicate your scared or angry feelings with nicotine."

Bad Mouthin: What Smokeless Tobacco Can Do to You

Organization: Wisconsin Clearinghouse

Year: 1990

Format: Comic Book

Length: 6 Pages

Topic: Smokeless Tobacco

Target Audience: Educators–Grades 1-9, Elementary Youth, and General Public

Setting: Community Organizations and Schools

Readability: Easy

Availability: Wisconsin Clearinghouse, University of Wisconsin, Box 1468, Madison, WI 53701-1468, 1-800-322-1468

This comic book uses cartoon sketches to convey the dangers of chewing smokeless tobacco. Young teens discuss the physical effects of snuff on the mouth and gums and dispel myths that many advertisements promote.

Inhalants-What You Should Know: Inhalant Abuse-Kids In Danger

Organization: National Federation of Parents

Year: 1992

Format: Brochure

Length: 6 Pages

Topic: Inhalants and Prevention

Target Audience: Parents of Children Ages 6-18

Setting: Schools and Community Organizations

Readability: Fairly Difficult

Availability: The National Federation of Parents for Drug Free Youth, 11159-B South Towne Square, St. Louis, MO 63123-7824, 314-845-1933

This brochure discusses the dangers of inhalant use or sniffing and mentions several household items that can be misused to get "high." The brochure looks at the short-term and long-term effects of sniffing and lists several potential signs of inhalant use, such as disappearing plastic bags, strong odors, and paint or glue on the face or clothing.

Cocaine/Crack: The Big Lie

Organization: Center for Substance Abuse Prevention

Year: 1991

Format: Booklet

Length: 10 Pages

Topic: Cocaine/Crack

Target Audience: General Public

Setting: Health Care

Readability: Average

Inventory no.: PHD585

Availability: National Clearinghouse for Alcohol and Drug Information, P.O. Box 2345, Rockville, MD 20847, 1-800-729-6686

This pamphlet explains the differences between crack and cocaine and discusses how these drugs affect the body. The information is presented in a question and answer format. Concerns about treatment, prenatal exposure, and symptoms of abuse are addressed.

Using Your Medicines Wisely: A Guide for the Elderly

Year: 1992

Format: Booklet

Length: 27 Pages

Topic: Alcohol and Other Drugs and Prevention

Target Audience: Elderly

Setting: Home and Community Organizations

Readability: Average

Inventory No.: PHD500

Availability: National Clearinghouse for Alcohol and Drug Information, P.O. Box 2345, Rockville, MD 20847, 1-800-729-6686

This booklet, designed for the elderly, explains the importance of "using your medicines wisely." It asks readers to take responsibility for their own health care by obtaining clear information from doctors and pharmacists and or-

ganizing a system for taking medicines. A pull-out chart is included to help readers keep track of emergency numbers and medications used.

How to Take Care of Your Baby Before Birth

Organization: Center for Substance Abuse Prevention

Year: 1991

Format: Brochure

Length: 4 Pages

Topic: Alcohol and Other Drugs and Prevention

Target Audience: Women

Setting: Health Care Centers

Readability: Easy

Inventory no.: PH239

Availability: National Clearinghouse for Alcohol and Drug Information, P.O. Box 2345, Rockville, MD 20847, 1-800-729-6686

This brochure describes how alcohol can affect an unborn child. It recommends ways for pregnant women to take care of themselves and advises against drinking during pregnancy.

American Indian Posters: Honor the Circle

Organization: Center for Substance Abuse Prevention

Year: 1992

Format: Posters

Topic: Alcohol and Other Drugs and Prevention

Target Audience: Native Americans

Setting: Community Organizations, Health Care Centers, and Schools

Readability: Low Literacy

Inventory no.: AV196, AV197, AV198

Availability: National Clearinghouse for Alcohol and Drug Information, P.O. Box 2345, Rockville, MD 20847, 1-800-729-6686

These colorful prevention posters, developed by the National Association for Native American Children of Alcoholics, depict traditional American Indian scenes and offer a clear message, "Join the circle and break the cycle of addiction."

Sober Skipper

Organization: Worcester County Health Department

Year: 1992

Format: Brochure

Length: 4 Pages

Topic: Alcohol and Other Drugs and Prevention

Target Audience: Sailors

Setting: Yachting Clubs, Bait and Tackle Shops, Boat Dealers

Readability: Average

Availability: Worcester County Health Department, P.O. Box 249, Snow Hill, MD 21863, 410-632-1100

This brochure advises captains of boats to stay sober themselves and set limits for their passengers regarding their alcohol intake. The pamphlet states "In an emergency situation, a drunken passenger is about as helpful as an umbrella in a typhoon." A resource for further information is also included.

Safe Winter

Organization: Snow County Coalition on Alcohol and Substance Abuse; Lewis County Council on Alcoholism and Substance Abuse

Year: 1991

Format: Brochure

Length: 6 Pages

Topic: Alcohol and Other Drugs and Prevention

Target Audience: Recreation/Sports Personnel, Hunters, Fishermen

Readability: Average

Availability: Lewis County Council on Alcoholism and Substance Abuse, 7612 State Street, P.O. Box 13, Louisville, NY, 13367

This brochure looks at how the body is affected by alcohol use during the coldest winter months. Trivia questions and a windchill factor chart point out the risks associated with extremely frigid weather. *What Are the Signs of Alcoholism?* and *Ten Winter Don'ts* are two main sections of the brochure.

Sharing Needles Can Get You More Than High: It Can Get You AIDS

Organization: National Institute on Drug Abuse

Year: 1989

Format: Print Ad

Length: 1 Page

Topic: Drugs and AIDS Prevention

Target Audience: Drug Users

Setting: Health Care

Readability: Easy

Inventory no.: AVD21

Availability: National Clearinghouse for Alcohol and Drug Information, P.O. Box 2345, Rockville, MD 20847, 1-800-729-6686

This 8 x 11 flyer shows a needle being passed from one hand to another with the message, "Sharing Needles Can Get You More Than High: It Can Get You AIDS." It explains that the AIDS virus can be transmitted by sharing needles and encourages drug users to get into treatment. A toll-free helpline is listed as a source for further help and information.

Studies, Articles, and Reports on Rural Communities

Government Publications and Journals

Improving the Health of Indian Teenagers: A Demonstration Program in Rural New Mexico

Davis, S. M.; Kitzes, J. M.; and Hunt, K.

Public Health Reports 104(3):271-278, 1989

(Available from Sally M. Davis, MED, Department of Pediatrics, University of New Mexico, Surge Bldg., Albuquerque, NM 87131.)

Indian teenagers in the United States have poorer health than the general population and the greatest frequency of alcohol-related problems of any ethnic group. Common barriers to their use of health care services are compounded by isolation, distance, and absence of suitable services in rural areas. A demonstration project established in rural New Mexico to overcome these barriers (1) set up one location where teenagers can obtain free, integrated, multiple health care services; (2) formed links with other agencies; and (3) incorporated community action toward change. Alcohol abuse evaluation, education, and counseling are among the project model's components, as is sponsorship of such activities as Students Against Driving Drunk (SADD). Adolescents participating directly in program planning have presented workshops at other schools on such topics as alcohol and drug abuse. The Teen Advisory Group presented a skit on drinking and driving. Preliminary findings indicate that most of the target population is using the services, with the proportions of girls and boys about equal, and the project is being replicated. 26 Ref.

Antecedents of Rural Adolescent Alcohol Use: Risk Factor Approach

Bloch, L. P.; Crockett, L. J.; and Vicary, J. R.

Journal of Drug Education 21(4): 361-376, 1991

(Available from Linda P. Bloch, Pennsylvania State University, University Park, PA 16802.)

The present study examines the association between risk factors and alcohol use for a sample of young adolescents in a rural eastern community. Family relations, family structure, marks in school, participation in academic activities, frequency of church attendance, and deviant behavior were found to be significantly associated with alcohol use 2 years later. No gender or age differences were found in these predictors of

alcohol use. These six risk variables were combined to form a risk index. A 3 x 2 x 2 (User group by Gender and Grade) ANOVA was used to examine the association between the risk index score at Year 1 and level of alcohol use at Year 3. Only the main effect for User group was significant. Thus, the number of risk factors at Year 1 was predictive of alcohol use at Year 3. The risk index also predicted frequency of alcohol use in a replication sample. Implications for the risk factor approach, prevention, and intervention are discussed.

Peer Influence and Drug Use among Adolescents in Rural Areas

Pruitt, B. E.; Kingery, P. M.; Mirzaee, E.; Heuberger, G.; and Hurley, R. S.

Journal of Drug Education 21(1):1-11, 1991

(Available from B. E. Pruitt, Department of Health and Physical Education, Texas A&M University, 160 Read Building, College Station, TX 77843-4243.)

A sample of 1,004 8th and 10th grade students in 23 small central/east Texas communities was assessed to determine (1) their perception of the number of their friends who use drugs, (2) the amount of information they received about drugs from their friends, and (3) the connection between those perceptions and drug use. A multiple regres sion model that included grade, gender, the degree to which friends are perceived to use drugs, and the amount of information about drugs received from friends explained 39 percent of the variance in the degree to which rural adolescents were involved in drug use. An item-specific analysis of the subcomponents of these composite variables explained 44 percent of the variance in the degree to which rural adolescents were involved in drug use. This same four-factor model accurately classified over 81 percent of non-drug users and 67 percent of users using discriminant analysis. Students who perceived a higher degree of drug use among their friends and who received more information about drugs from their friends used drugs more frequently. Lower marijuana use in these rural areas as compared to the Nation, both as a peer perception and as a fact, may protect these students to a degree from broader patterns of drug use. The findings of this study support the theory that peer pressure is related to drug abuse, even in rural areas. 19 Ref.

Adolescent Substance Prevention Education Network: Rural-Based Pilot Program for Preventing Alcohol and Other Drug Use among Pregnant Adolescents

Ford, T. D., and Sarvela, P. D.

In *Working with Youth in High-Risk Environments: Experiences in Prevention. OSAP Prevention Monograph 12*, C. E. Marcus, J. D. Swisher, Eds., pp. 31-42. Rockville, MD: Center for Substance Abuse Prevention, 1992

(Available from the National Clearinghouse for Alcohol and Drug Information, P.O. Box 2345, Rockville, MD 20847.)

Although the majority of research studies concerning alcohol and other drug (AOD) problems among youth are based in urban populations, AOD use is not a problem confined to the cities. Many studies have found that AOD use has reached an alarming rate in rural regions. This document describes a study of AOD use and related behavioral

problems of participants enrolled in the Adolescent Substance Prevention Education Network (ASPEN), a program sponsored by the Shawnee/Adolescent Health Center (SAHC) and designed to reduce AOD problems among pregnant teens in rural southern Illinois. The ASPEN curriculum includes eight modules that address the following topics: general alcohol and other drug information; fetal development; decision making and self-esteem; alcohol, health, and nutrition; prescription and nonprescription drugs; smoking; marijuana; and stress. Pilot study findings showed a high rate of cigarette and caffeine use among ASPEN program participants. Many of the participants' friends were involved with AOD use, indicating a need to add a refusal skills/peer pressure component to the ASPEN curriculum package. Participants said they had heard about the problems related to AOD use and pregnancy through SAHC, suggesting strong support for the implementation of similar programs in other adolescent health clinic settings. 12 Ref.

Risk Factors for Drug Use in Rural Adolescents

Farrell, A. D.; Anchors, D. M.; Danish, S. J.; and Howard, C. W.

Journal of Drug Education 22(4):313-328, 1992

(Available from Albert D. Farrell, Department of Psychology, Box No. 2018, Virginia Commonwealth University, Richmond, VA 23284-2018.)

This study tested the relevance of a risk factor model for predicting drug use among rural adolescents. A questionnaire assessing drug use and the presence/absence of 20 risk factors derived from a previous study of urban adolescents was administered to a sample of seventh graders in the public school system of a rural community. All but one of these risk factors were found to be significantly associated with the prevalence and frequency of use for cigarettes, beer and wine, hard liquor, marijuana, and other drugs. These findings support the generalizability of a risk factor approach to predicting drug use and underscore the need for increased prevention and research efforts directed at rural adolescents.

Rural Mental Health and Substance Abuse Resources Directory 1993

Report, Office of Rural Health Policy, 1993

(Available from the National Rural Health Association, 301 East Armour Boulevard, Suite 420, Kansas City, MO 64111.)

This publication is the first edition of the *Rural Mental Health and Substance Abuse Resources Directory*, a joint undertaking between the Federal Office of Rural Health Policy and the National Rural Health Association. Rural health issues, including rural mental health and substance abuse issues, have received significant attention at the Federal, State, and local levels during the past years. In addition, a wide range of public and private sector organizations have become involved in rural health issues. Recognizing that networking, coordination, and cooperation are key to improving the delivery of rural health services, this directory is designed to facilitate contact between individuals, organizations, and agencies.

U.S. Rural Drug Abuse Research Needs and Research Policy

Moxley, R. L.

Employee Assistance Quarterly 7(1/2):117-139, 1992

(Available from *Drugs and Society*, The Haworth Press, 10 Alice Street, Binghamton, NY 13904.)

This article is the result of a literature review and assessment of rural drug abuse research and drug research policy formation by U.S. Government agencies. It also presents results of a participant observation study of one of the major research institutes, the National Institute on Drug Abuse (NIDA), and its linkages with groups influential to its research policies. NIDA also had linkages that influence its other activities, such as service and drug testing oversight functions; however, these activities were not studied. This review reveals a decade of relative inattention to the job of obtaining a national assessment of the rural drug situation, especially with regard to prevalence and impact of drugs in the adult population, efficacy of prevention efforts by rural institutions and workplaces, effectiveness of treatment programs, and drugs and crime. There have also been relatively few individual subnational or regional research efforts or even rural-urban case study comparisons aimed at these research topics. A variety of influences on drug research policy were discovered. Rural drug research advocates need to be knowledgeable about these influences in order to use them to stimulate support for rural drug research. The main influences were found to be in certain committees and offices in the legislative and executive branches of the Federal Government. Cases were also identified, however, in which non-governmental organizations were found to be influential and, in certain cases, even individuals were found to have some impact on research policy.

Rural Hospital-Based Alcohol and Chemical Abuse Services: Availability and Adoption, 1983-1988

Mick, S. S.; Morlock, L. L.; Salkever, D.; deLissovoy, G.; Malitz, F. E.; and Jones, A. S.

Journal of Studies on Alcohol 54(4):488-501, 1993

(Available from Rutgers University, Box 969, Piscataway, NJ 08855.)

Data from a 1983-88 retrospective panel study of 797 rural (non-Metropolitan Statistical Area) U.S. hospitals revealed that less than one in five (18.7 percent) had any alcohol and chemical abuse (ACA) service. About one-third of both inpatient and outpatient services had been established during the study period, but few hospitals not offering these services planned to offer them in the immediate future. These findings support other studies showing that the availability of such services may not meet population need or demand, although analysis showed that hospitals in more densely populated counties with higher per capita income and more physicians per 1,000 population were positively associated with ACA services. Hospitals that were in the New England, Mid-Atlantic, East North Central census divisions and were large according to number of beds, presence of psychiatric services, availability of psychiatrists and other nonphysician personnel, certain organizational arrangements, and strategic management activities were positively

associated with ACA services. Multivariable logistic regression suggested the presence of psychiatric service as a key correlate of ACA services, and the scarcity of psychiatric personnel in rural areas appears to have been a major reason for the infrequence of rural hospital-sponsored ACA services.

Crime Victimization in City, Suburban, and Rural Areas: A National Crime Victimization Survey Report

Bachman, R.

Washington, DC: Bureau of Justice Statistics, 1992. 16 pp.

(Available from the U.S. Department of Justice, Office of Justice Programs, Bureau of Justice Statistics, Washington, DC 20531.)

A summary is provided on what is known about crime victimization and how it compares to both urban and suburban victimizations. An analysis is presented of trends in violence, theft, and household victimization across the three areas from 1973 to 1989. The differences in crime victimization rates between rural, suburban, and urban areas are examined. The nature of rural violent crime victimizations, such as victim/offender relationships, offender's use of drugs and alcohol, and self-protection are compared to both urban and suburban victimizations.

Rural Drug Abuse: Prevalence, Relation to Crime, and Programs

Wargo, M. J.; Solomon, J.; Oppenheim, J.; Sharma, S.; and Rom, M.

Report, General Accounting Office, Washington, DC, September 14, 1990

(Available from the U.S. General Accounting Office, P.O. Box 6015, Gaithersburg, MD 20877.)

This report, written at the request of five U.S. senators, examines the extent and the effects of the drug crisis in rural areas of the United States. The researchers defined substance abuse as involvement with illegal drugs, illegal use of drugs, or drug use linked to other criminal activity or needing treatment. The research data show that total substance abuse rates in rural States are about as high as in nonrural States; of all substances, alcohol is by far the most widely abused; and the difference between rural and nonrural areas is that prevalence rates for some drugs (such as cocaine) appear to be lower in rural areas, while prevalence rates for other drugs (such as inhalants) may be higher. Other findings: rural area arrest rates for substance abuse violations are as high as those in nonrural areas; most prison inmates in rural States have abused alcohol, other drugs, or both; and the prevalence of substance abuse among inmates completely overwhelms available treatment services. For purposes of this study, a rural State is defined as having a population density of 50 persons or fewer per square mile. These are: Alaska, Arkansas, Arizona, Colorado, Idaho, Iowa, Kansas, Maine, Montana, Nebraska, Nevada, New Mexico, North Dakota, Oklahoma, Oregon, South Dakota, Utah, and Wyoming. 48 Ref.

What Works? HIV/AIDS Education in Rural America

McReynolds, V., and Hall, M.

Report, Centers for Disease Control, 1990
(Available from Vicki McReynolds, National Rural and Small Schools Consortium, Miller Hall 359, Western Washington University, Bellingham, WA 98225.)

The 32 schools and districts that participated in this survey are presented as chapters, and community and school demographics are described for ease of comparison. The State context and local context of the education program about AIDS and HIV are summarized to provide background information. Strategies that have been effective for each school or district are listed, and each chapter describes HIV/AIDS education programs that are specifically rural and gives information about implementing effective education programs. Schools from the following States participated: Delaware, Florida, Idaho, Illinois, Indiana, Iowa, Kansas, Maine, Maryland, Massachusetts, Minnesota, Nebraska, New Jersey, New Mexico, New York, Oklahoma, Oregon, Rhode Island, South Dakota, Tennessee, Texas, Vermont, Virginia, Washington, Wisconsin, and Wyoming.

AIDS and Drug Abuse in Rural America

Steel, E., and Haverkos, H. W.

Journal of Rural Health 7(3):70-73, 1992
(Available from Elizabeth Steel, MSW, Community Research Branch, Division of Applied Research, National Institute on Drug Abuse, Room 9A30, Parklawn Building, Rockville, MD 20857.)

This paper reviews the nature and extent of drug abuse-related HIV disease services in the rural United States. Issues concerning the delivery of HIV disease and substance abuse health care services in rural settings are outlined and discussed. 24 Ref.

Pass the Bottle, Brol: A Comparison of Urban and Rural Indian Drinking Patterns

Weibel-Orlando, J. C.

In *Alcohol Use Among U.S. Ethnic Minorities. NIAAA Research Monograph No. 18*, D. Spiegler, D. Tate, S. Aitken, C. Christian, Eds., pp. 269-289. Rockville, MD: Department of Health and Human Services, 1989
(Available from the National Clearinghouse for Alcohol and Drug Information, P.O. Box 2345, Rockville, MD 20847.)

After presenting a review of the literature on alcohol use and abuse among American Indians from the early 1950s until the present, this paper describes research on alcoholic beverage consumption among urban and rural American Indians and its relationship to selected demographic, psychological, and personal history variables. A total of 323 Indians of both sexes, representing four tribal affiliations (Navaho, Sioux, Eastern Oklahoma Indians, and California Indians) and residing in the Los Angeles area or in their respective rural or reservation homelands, were included in this study. The participants ranged from abstainers to very heavy drinkers. Current and former drinking frequency and quantity measures from partially overlapping samples (with lifetime abstainers included with current drinkers, on the one hand, and with now-abstaining former drinkers on the other) were subjected to multivariate analyses of

variance and covariance. The effects on drinking of urban versus rural residence, tribal affiliation, and sex, as well as interrelationships with participants' age, proportion of Indian ancestry, psychosomatic stress (as measured by the Cornell Medical Index CMI), and drinking in the household of origin are assessed. The findings are discussed in relation to ethnographic observations and recent historical developments, as well as theoretical and policy implications. 118 Ref.

Prevalence and Correlates of Alcohol Use in a Survey of Rural Elementary School Students: The New Hampshire Study

Stevens, M.; Youelles, F.; Whaley, R.; and Linsey, S.

Journal of Drug Education 21(4):333-347, 1991

(Available from Marguerite Stevens, Ph.D., Dartmouth Medical School, Hinman Box 7927, Hanover, NH 03756.)

Alcohol use by 1,190 fourth, fifth, and sixth grade students was assessed in a survey of four rural New Hampshire school districts. Half of the students surveyed (596) drank, but not regularly; 5 percent (59) were regular drinkers, and an additional 2 percent (19) were regular drinkers and had been drunk at least once. Reported alcohol use increased with both grade and age, and males drank more than females. The child's attitude toward drinking, perceived family attitudes towards drinking, the number of drinking friends, and self-perception were four factors strongly related to alcohol use. Increased alcohol use was also associated with experimental and current use of cigarettes, marijuana, and smokeless tobacco. 45 Ref.

Health Care in Rural America: Summary

Report, Office of Technology Assessment, Congress of the United States, September 1990

(Available from the Office of Technology Assessment, Washington, DC 20510-8025.)

This report discusses the access of people in rural America to basic health care services. The 1980s witnessed rural economic decline and instability, major changes in Federal health programs, and increasing concern about the long-term viability of the rural health care system. This concern prompted the Senate Rural Health Caucus and the Ranking Minority Member of the Senate Committee on Labor and Human Resources to request that OTA assess the availability of health services in rural communities, the problems rural providers face, and the remedial strategies that might be influenced by Federal policy. This report focuses on trends in the availability of primary and acute health care in rural areas and factors affecting those trends. For example, rural residents are characterized by relatively low mortality but relatively high rates of chronic disease; persons living in low-density "frontier" counties--counties of six or fewer persons per square mile--can have geographic access problems of immense proportions; and rural residents are much more likely than urban residents to have no health insurance coverage. Rural health service issues and options are discussed as are issues surrounding personnel shortages and concerns. Two specific services are described: issues and options in maternal and infant care and issues and options in mental health care. Fetal, infant, and maternal mortality are all disproportionately high in rural areas. Two potential contributors to the relatively poorer

health of rural mothers and infants are the limited availability of obstetric providers and access to specialized care for women with difficult pregnancies and deliveries. The prevalence of mental disorders in rural Americans is similar to that of their urban counterparts. The severe shortage of psychiatrists and doctoral-level psychologists in rural areas, the proportion of mental health care provided by nonpsychiatric physicians, and the types of services likely to be most acceptable to rural residents all suggest that integrating mental health and other health care is especially important in rural areas.

Other Publications

Drinking, Drug Use, and Driving Among Rural Midwestern Youth

Sarvela, P. D.; Pape, D. J.; Odulana, J.; and Bajracharya, S. M.

Journal of School Health 60(5):215-219, 1990.

(Reprints available from Paul D. Sarvela, Department of Health Education, College of Education, Southern Illinois University, Carbondale, IL 62901.)

Data concerning self-reported driving after drinking or using other drugs were collected from 3,382 junior and senior high school students in rural central and southern Illinois. Drinking, drug use, and driving increased steadily with age, with 42 percent of the 12th grade class indicating they had driven a car at least one time in the past 6 months after drinking or using other drugs. Riding with a driver who had been drinking also increased with age: 20 percent of the seventh-grade sample had ridden in a car with a drinking driver, while 58 percent of the 12th grade sample reported having done so. Slightly more females had ridden in a car with a driver who had been drinking than males, while males reported higher rates of driving after drinking or using other drugs than females. Correlation analyses indicated 22 variables related significantly to drinking, drug use, and driving. Forward stepwise multiple regression analysis showed that 11 variables related significantly to riding as a passenger with a drinking driver. Thirteen variables were related significantly to driving after drinking or using other drugs. Frequency of alcohol use variables were the most powerful indicators of self-reported driving after drinking or using other drugs in this sample.

Prevalence of Substance Use in a Rural Teenage Population

Silverman, W. H.

Journal of Adolescent Chemical Dependency 2(1):107-117, 1991

(Available from Wade H. Silverman, Barry University, Department of Psychology, 11300 NE 2nd Avenue, Miami Shores, FL 33161-6695.)

A survey was administered to all students enrolled in a rural county school system, grades 7-12 (N = 1,175) to assess prevalence rates of substance use for teens and their parents and lifestyle variables that relate to substance use. The variables of age, sex, and race were all related to both frequency and type of substance abuse. Lifestyle variables, such as music preference, sexual activity, and choice of friends, also related to

substance use. Recommendations for planning primary prevention programs based upon findings were discussed.

Rural Black Adolescents: Psychosocial Development in a Changing Environment

Lee, C. C.

In *Black Adolescents*, R. L. Jones, Ed., pp. 79-96. Berkeley, CA: Cobb & Henry, Publishers, 1989

This chapter focuses on the psychosocial development of Black adolescents residing in rural areas of the Nation. Despite the fact that approximately one-fourth of the Black population of the United States lives in rural regions, most analysis and research has focused exclusively on the social and economic considerations of urban Black youth. While rural youth face many of the same challenges that confront urban adolescents, the nature of the rural Black environment serves to alter the impact of these stresses for rural youth. Identity development among rural Black adolescents appears to be influenced by several major areas: home and family life, school experiences, social relationships, activities, aspirations, attitudes and values, and self-concept. Close, supportive family systems and well-developed community networks that include the church and the school seem to play the most significant roles in psychosocial development. Socialization within these networks produces important personality characteristics that provide the basis for adolescent identity formation.

Substance Abuse Among Youth (Grades 4-12) in Rural Indiana: Parents' vs. Children's Perceptions

Deffenbaugh, K. B.; Hutchinson, R. L.; and Blankschen, M. P.

Conference Paper, Madison Consolidated Schools, February 7-8, 1991

(Available from Roger L. Hutchinson, Ball State University, Muncie, IN 47306.)

The purposes of this study were to assess the use of substances by 2,125 youth (grades 4-12) in rural Indiana and to explore the differences in perceptions between these students and their parents regarding the students' use of substances. While all parents believed that some students were using cigarettes, alcohol, and marijuana, they seriously underestimated the percentage of students in their child's grade who reported the use of a variety of substances (especially alcohol) by themselves and their peers. If parents are to be allies in the fight against drugs, it is imperative that they be aware of the severity of the problem.

Value Differences Across Tobacco Use Levels Among Rural Adolescents

Mayton, D. M., and Nagel, E. A.

Conference Paper, Los Angeles, CA, April 28, 1990

(Available from Daniel M. Mayton, II, Lewis-Clark State College, Lewiston, ID 83501.)

Values are a central concept in understanding and predicting human behavior. Given the increase of tobacco use among adolescents, understanding the personality variables and characteristics associated with tobacco use is critical.

The purpose of this study was to identify differences and similarities among the value hierarchies of adolescents who have never tried tobacco, adolescent tobacco experimenters, and adolescents who use tobacco daily. A large written questionnaire was administered to a sample of 5,128 adolescents from grades 7 through 12 in the rural inland northwest. The questionnaire assessed reported tobacco use, selected demographic information, and terminal values with the Rokeach Value Survey. The priority placed on the terminal values of health, family security, a comfortable life, a world at peace, a sense of accomplishment, an exciting life, mature love, pleasure, social recognition, national security, and salvation were statistically significant in differentiating the three groups of adolescents. 24 Ref.

Drug and Alcohol Use Prevention: Utility and Effectiveness with Rural Fifth-Grade Students

Blau, G. M.

Dissertation Abstracts International 50(8):2426-A, 1990

(Available from UMI, 300 North Zeeb Road, Ann Arbor, MI 48106. Refer to number DA 8918773.)

The purpose of this investigation was to determine the short- and long-term effectiveness of drug and alcohol use prevention programs with rural fifth-grade students. Five classrooms (approximately 115 children) from Pike County, Alabama, were randomly assigned to one of five treatment conditions. These conditions were a no-treatment group, a placebo discussion group, a drug and alcohol education group, an assertiveness training group, and an interpersonal problem-solving group. The eight sessions for these programs (with the exception of the nontreatment group) were held once a week for 1 hour. Pretest scores were obtained 1 week prior to the start of the first session, post-test scores were obtained 3 weeks after the completion of the final session, and follow-up scores were obtained 1 year after the completion of the final session. The short- and long-term effectiveness of these interventions were compared by using hierarchical regression analyses and analyses of variance. The results for the short-term evaluation indicated that all programs reduced children's likelihood to use drugs compared to the control procedures.

Sources of Drug and Alcohol Information Among Rural Youth

Sarvela, P. D.; Newcomb, P. R.; and Littlefield, E. A.

Health Education 19(3):27-31, 1988

(Available from Paul D. Sarvela, Department of Health Education, Southern Illinois University, Carbondale, IL 62901.)

The purpose of this study was to identify rural youth sources of alcohol and other drug information in order to establish baseline information for the design and development of effective rural drug and alcohol abuse prevention programs. Data were collected from 622 junior and senior high school students in rural northwest Ohio in May 1985. The county from which this sample was drawn is a geographically large, predominantly rural county characterized by small communities and family farms. The media (18.8 percent) (TV, radio, newspapers, and magazines) and teachers at school (18.8 percent) were

identified most frequently by the study sample as the source from which they learned the most about alcohol and other drugs. This was followed by close friends (11.2 percent), personal experiences with drugs and alcohol (7 percent), and parents (6.9 percent). Only 2.9 percent of the students cited brothers or sisters or people from alcohol and drug agencies as primary sources of drug and alcohol information. "Other" was cited by 23.2 percent of the sample, while 17.8 percent said they didn't know very much about alcohol and other drugs. 24 Ref.

Adolescent Drinking Problems: Urban vs. Rural Differences in Nova Scotia

Mitic, W. R.

Canadian Journal of Community Mental Health 8(1):5-14, 1989

(Available from Wayne R. Mitic, Ed.D., Associate Professor, Health Education Division, Dalhousie University, Halifax, Nova Scotia, NS B3H 3J5, Canada.)

The nature and extent of alcohol-related problems experienced by adolescents were evaluated in 1,132 male and female Canadian subjects living in an urban setting and in 987 male and female Canadian subjects living in a rural setting. The subjects were 13- to 19-year-old students in grades 9 through 12. Information on three types of alcohol-related problems, including social consequences, early dependency symptoms, and vandalism or violence, was obtained by questionnaire. More rural than urban junior high school students reported problems with school, police, and money, but more urban senior high school students reported pre-party drinking activity. The overall results suggest that the small-town environment of a rural area does not provide insulation against the risks and problems of teenage alcoholism. Implications for developing prevention and intervention programs for both rural and urban adolescents are discussed. 19 Ref.

Drug Use Patterns Among American Indian and Alaska Native Youth: Special Rural Populations

Beauvais, F., and Segal, B.

Drugs & Society 7(1/2):77-94, 1992

American Indian and Alaska Native communities illustrate the great diversity found among the rural populations of the United States. These communities are marked by cultural, socioeconomic, and historical patterns that differ from other rural groups and that lead to a distinctive set of social problems. When compared to a national sample of youth, American Indian and Alaska Native youth show exceptionally high levels of drug use. Because they share a number of similar cultural characteristics, it could be hypothesized that the rates of drug use among these Native groups are related to cultural traits. However, non-Native Alaskan youth also have high rates of drug use, indicating that factors in the social environment other than culture account for this behavior. Possible explanatory factors include uncertain economic conditions, family instability, and lack of access to cultural values. Although rural living in itself is not necessarily a contributing factor to drug use, it does place some constraints on intervention efforts. Geographic isolation and lack of adequate

health and social service resources make it difficult to develop adequate prevention and treatment services.

Trends and Issues Surrounding Rural Adolescent Alcohol and Other Drug Abuse

Madlem, M. S.

Prevention Forum 1992, (Vol. 12, No. 2), pp. 1-9

With prevalence rates declining for overall drug use, the rural areas appear to be matching, or even surpassing, urban areas. The trends and issues surrounding rural adolescent alcohol and other drug use are examined. The inherent population density problem faced in rural areas has contributed to the underfunding of programs targeted at the prevention and treatment of alcohol and other drug problems for rural youth. This underfunding has led to a lack of trained and experienced staff and a lack of rural-specific programs and models from which the rural professional can draw. 19 Ref.

Alcohol and Other Drug Service Needs in Rural Communities

Long, J. E.

Prevention Forum Winter/Spring, 1992. p. 9

Rural families have the same concerns that urban families do about whether their children grow up drug-free. The incidence of alcoholism and substance abuse in rural communities is no less than among urban populations. Residents of rural communities face real barriers to treatment for substance abuse, including isolation, transportation difficulties, economic conditions, and health care shortages. Prevention is vitally important in rural areas, but geographic distances create barriers to the delivery of effective prevention services. The Illinois Department of Alcoholism and Substance Abuse (DASA) has worked to ensure that every community has access to an array of services from detoxification to residential rehabilitation to outpatient services and has made prevention service grants that recognize how much travel is necessary to serve rural areas.

Physical, Subjective, and Social Availability: Their Relationship to Alcohol Consumption in Rural and Urban Areas

Abbey, A.; Scott, R. O.; and Smith, M. J.

Addiction 88(4):489-499, 1993

(Available from Antonia Abbey, Department of Community Medicine, Wayne State University, 4201 St. Antoine, Detroit, MI 48201.)

The alcohol availability literature indicates that under some conditions, physical availability is positively associated with per capita alcohol consumption. For example, Smart suggested that at the individual level, subjective and social aspects of availability may mediate and outweigh the influence of physical availability. The study described here examined the simultaneous effects of physical, subjective, and social availability on alcohol consumption. Standardized telephone interviews were conducted with 781 adult drinkers. As hypothesized, physical availability was not a significant multivariate predictor of alcohol consumption for residents of high, medium, and low alcohol outlet

density counties in Michigan. Subjective and social availability indicators were significant predictors of alcohol consumption. Similar patterns of results were found in multiple regression analyses for Blacks and Whites and women and men, although Blacks and women consumed less alcohol than did Whites and men. The theoretical and practical implications of these results are discussed.

Drug Use in Rural American Communities

Edwards, Ruth W., ed.

Binghamton, NY: The Haworth Press, Inc., 1992

This book brings together experts in the field to look at what is known about drug use in rural areas of the United States and gives them the opportunity to make recommendations for future research needs and policy formation. It provides information and insights useful for researchers, lawmakers, government officials, field practitioners, and others involved with rural populations to make decisions about research, policy, and services with respect to alcohol and other drug use in rural populations. Six studies are included: (1) Drug and Alcohol Use by Youth in Rural America: An Introduction; (2) Drug Use in Rural Communities: An Epidemiology; (3) The Use of Alcohol, Marijuana, and Hard Drugs by Rural Adolescents: A Review of Recent Research; (4) Drug Use Patterns Among American Indian and Alaska Native Youth: Special Rural Populations; (5) Rural Drug and Alcohol Treatment; and (6) U.S. Rural Drug Abuse Research Needs and Research Policy.

Substance Abuse in Rural Communities

Substance Abuse in Schools December 1989, pp. 2-3

(Available from *Substance Abuse in Schools*, National Professional Resources, Inc., P.O. Box 1479, Port Chester, NY 10573.)

Alcohol remains the primary drug of abuse in rural areas, although use of crack and cocaine is increasing and tobacco smoking and chewing are also large problems. In a small town where residents are well known to each other, it is more stigmatizing to seek help from outside professionals. Small towns have big drug problems, but they tend to have limited resources to fight those problems. Because of resistance from school boards, administrators, and teachers, it is difficult to establish prevention programs in schools, although that is the best chance for success. Rural youths have a greater difficulty with the transition to high school, a key time for alcohol and drug prevention. 1 Ref.

Needs of Rural Schools Regarding HIV Education

Helge, D.

Report, National Rural and Small Schools Consortium, Bellingham, Washington, 1989

(Available from the National Rural and Small Schools Consortium, Western Washington University, Miller Hall 359, Bellingham, WA 98225.)

A comprehensive literature review revealed that rural schools, although they tend to resist sex education, are experiencing growing numbers of intravenous drug users, pregnant teenagers, and sexually transmitted diseases. Through sexual activity and intravenous drug use, rural teenagers are placing them-

selves at risk for becoming infected with HIV and contracting AIDS. The relationship between teen sexual behavior and the level of self-esteem has been well established, as have problems with traditional approaches to sex education. This article outlines factors in effective sex education programs and explains that sex education, in isolation, is not a deterrent. Problems specific to rural areas are emphasized in the article, as are the necessity of rural-oriented approaches. Examples of viable methods of integrating HIV education into rural schools and community life are provided. 20 Ref.

Partners in Prevention: Substance Abuse Prevention Handbook for Rural Oklahoma Communities

Handbook, American Indian Institute, 1989-1991

(Available from American Indian Institute, Continuing Education and Public Service, University of Oklahoma, 555 Constitution, Room 237, Norman, OK 73037-0005.)

The Partners in Prevention (PIP) Project was designed as both a community and school-based substance abuse prevention and in-service training demonstration model for use in several rural Oklahoma communities. It is believed that this project can be replicated in other rural communities in Oklahoma as well as throughout the Nation. A step-by-step outline is provided of the PIP Project for its replication or adaptation throughout rural America. Project activities include the collection of statistical data, training in team building, action planning, problem solving, intervention resource identification, substance abuse prevention identification and awareness, and technical assistance in creating local sanctions and guidelines.

Relation of Rural Alcoholism to Farm Economy

Hsieh, H. H.; Cheng, S. C.; Sharma, A.; Sanders, R. A.; and Thiessen, C.

Community Mental Health Journal 25(4):341-347, 1989

(Available from Hudson H. Hsieh, M.D., Creighton Psychiatric Associates, 2205 South 10th Street, Omaha, NE 68108.)

The relationship of rural alcoholism to the state of the farm economy is discussed. Data reported to the Nebraska Department of Public Institutions, Division on Alcoholism and Drug Abuse, for the 8-year period starting in 1978 were analyzed. During this very difficult period for the farm economy, 126,350 new cases were reported, of which 5,268 or 4.2 percent were farmers. The number of persons seeking treatment grew steadily; however, the total number of farmers seeking treatment peaked in 1982 and then began a steady decline. It is suggested that the farmers may have looked to sources other than mental health facilities for help or that they adapted to the new demands, thereby reducing their need to use alcohol consumption as a coping mechanism. 10 Ref.

State Initiatives to Improve Rural Health Care

Report, National Governors' Association, Washington, DC, 1990

(Available from the National Governors' Association, 444 North Capitol Street, Washington, DC 20001.)

Rural health issues have attracted significant interest during the past several years. Governors have become acutely aware of failing rural hospitals and the shortage of health personnel in rural communities. At the Federal level, a broad range of legislative and program initiatives have been implemented, including the creation of a Federal Office of Rural Health Policy. Many States also have moved forward with their own programs, including the establishment of offices to serve as the focal point for rural health. This publication describes a broad range of ongoing State programs and policies designed to improve access to health care in rural communities. It presents the results of a State survey and includes profiles of State rural health task forces and commissions, State offices of rural health, and State rural health programs. By identifying approaches States have used to address the common problems in rural health care delivery, this document provides an information base to guide future rural health initiatives.

Groups, Organizations, and Programs on Rural Communities

Al-ANON Family Groups, Inc.
World Service Office
P.O. Box 862, Midtown Station
New York, NY 10018
1-800-344-2666

Alcoholics Anonymous
World Service Office
475 Riverside Drive
New York, NY 10115
212-870-3400

Center for the Study of Small/Rural Schools
555 Constitution Street, Suite 213
University of Oklahoma
Norman, OK 73037
405-325-1450

Center for Substance Abuse Treatment Drug Abuse Information and Treatment Referral Hotline
1-800-662-HELP

The Congress of National Black Churches
1225 Eye Street, NW, Suite 750
Washington, DC 20005-3914
202-371-1091

Community Transportation Association of America
1440 New York Avenue, NW
Suite 440
Washington, DC 20005
202-628-1480

CSAP's Technical Assistance Services to Communities
Westover Consultants, Inc.
820 First Street, NE, Suite 510
Washington, DC 20002
1-800-388-5556

CSAP's Workplace Helpline
1-800-843-4971

Edmund S. Muskie Institute of Public Affairs
Rural Youth Project
University of Southern Maine
96 Falmouth Street
Portland, ME 04103
207-780-4430

ERIC Clearinghouse on Rural Education and Small Schools
Appalachia Educational Laboratory
P.O. Box 1348
Charleston, WV 25325
1-800-624-9120

Farm Safety for "Just Kids"
130 East First Street
P.O. Box 458
Earlham, IA 50072
515-758-2827

Hazelden Educational Materials
P.O. Box 176
Center City, MN 55012
1-800-328-9000

Institute on Black Chemical Abuse
2616 Nicollet Avenue South
Minneapolis, MN 55408
612-871-7878

Johnson Institute
7205 Ohms Lane
Minneapolis, MN 55439-2159
1-800-231-5165

Mothers Against Drunk Driving (MADD)
511 East John Carpenter Freeway
Suite 700
Irving, TX 75062

Nar-Anon Family Group
213-547-5800

Narcotics Anonymous
818-780-3951

National 4-H Council
7100 Connecticut Avenue
Chevy Chase, MD 20815
301-961-2800

National Agriculture Library
Youth Development Education Center
Room 304
10301 Baltimore Boulevard
Beltsville, MD 20705
301-504-6400

National Asian Pacific American Families Against Substance Abuse
420 East Third Street, Suite 909
Los Angeles, CA 90013
213-617-8277

National Association for Native American Children of Alcoholics
P.O. Box 18736
Seattle, WA 98118
206-467-7686

National Association for Rural Mental Health
P.O. Box 570
Wood River, IL 62095
618-251-0589

National Association of State Alcohol & Drug Abuse Directors (NASADAD)
444 North Capitol Street, NW
Suite 642
Washington, DC 20001
202-783-6868

National Clearinghouse for Alcohol and Drug Information
P.O. Box 2345
Rockville, MD 20847
301-468-2600, 1-800-729-6686
TDD 1-800-487-4889

National Coalition of Hispanic Health and Human Services Organizations
1501 16th Street, NW
Washington, DC 20036
202-387-5000

National Cocaine Hotline
1-800-COCAINE

National Council on Alcoholism and Drug Dependence, Inc.
212-206-6770
1-800-NCA-CALL

National Rural Health Association
301 East Armour Boulevard
Suite 420
Kansas City, MO 64111
816-756-3140

National Rural Health Network
National Rural Electric Cooperative Association
1800 Massachusetts Avenue, NW
Washington, DC 20036
202-857-9500

National Rural Institute on Alcohol and Drug Abuse
Arts and Sciences Outreach Office
UW- Eau Claire
Eau Claire, WI 54702-4004
715-836-2031

Parents' Resource Institute for Drug Education, Inc. (PRIDE)
50 Hurt Plaza, Suite 210
Atlanta, GA 30303
404-577-4500, 1-800-677-7433

Rational Recovery Systems
P.O. Box 800
Lotus, CA 95651
916-621-2667

Remove Intoxicated Drivers (RID)
P.O. Box 520
Schnectady, NY 12301
518-372-0034

Rural Information Center Health Service
Department of Agriculture Specialty Center, Cooperative Extension
U.S. Department of Agriculture
National Agriculture Library
10301 Baltimore Boulevard
Beltsville, MD 20705-2351
301-504-6400

Rural Information Center Health Service
U.S. Department of Agriculture
National Agriculture Library
10301 Baltimore Boulevard
Beltsville, MD 20705-2351
301-504-5547 or 1-800-633-7701

Students Against Driving Drunk (SADD)
200 Pleasant Street
Marlboro, MA 01752
508-481-3568

U.S. Office of Rural Health Policy
Parklawn Building, Room 9-05
5600 Fishers Lane
Rockville, MD 20857
301-443-0835

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